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Bib Data Sheet

CONFIRMATION NO. 1955

<b>SERIAL NUMBER</b> 09/872,640	<b>FILING OR 371(c) DATE</b> 05/31/2001 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> 020460000210	
<b>APPLICANTS</b> Motasim Sirhan, Sunnyvale, CA; John Yan, Los Gatos, CA; Kevin Gertner, Los Gatos, CA;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/585,943 06/02/2000 PAT 6,569,180					
<b>** FOREIGN APPLICATIONS *****</b> <i>none</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/15/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 47	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 60168					
<b>TITLE</b> Catheter having exchangeable balloon					
<b>FILING FEE RECEIVED</b> 1039	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		